



PTO/SB/21 (08-03)

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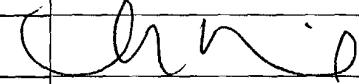
Application Number	10/028,999
Filing Date	December 20, 2001
First Named Inventor	BLUMENKRANZ, STEPHEN J.
Art Unit	2837
Examiner Name	San Martin, Edgardo
Total Number of Pages in This Submission	Attorney Docket Number 017516-008310US

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
	Remarks <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

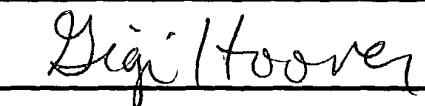
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Townsend and Townsend and Crew LLP Nena Bains	
Signature		
Date	Reg. No. 47,400 December 10, 2003	

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Gigi Hoover		
Signature		Date	December 10, 2003

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FEET TRANSMITTAL

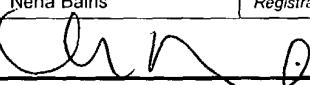
for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

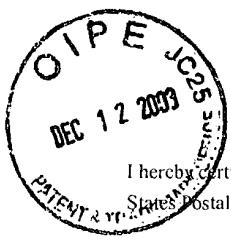
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27
TOTAL AMOUNT OF PAYMENT (\$ 839)

Complete if Known	
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Filing Date	December 20, 2001
First Named Inventor	BLUMENKRANZ, STEPHEN J.
Examiner Name	San Martin, Edgardo
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METHOD OF PAYMENT (check all that apply)																																																																																																																																																																																								
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SUBMITTED BY					
Name (Print/Type)	Nena Bains	Registration No. (Attorney/Agent)	47,400	Telephone	415-576-0200
Signature			Date	December 10, 2003	

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On December 10, 2003

TOWNSEND and TOWNSEND and CREW LLP

By: Liz Hoover

PATENT
Attorney Docket No.: 017516-008310US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

BLUMENKRANZ, Stephen J.

Application No.: 10/028,999

Filed: December 20, 2001

For: CEILING AND FLOOR
MOUNTED SURGICAL ROBOT SET-
UP ARMS

Customer No.: 20350

Confirmation No.: 3769

Examiner: San Martin, Edgardo

Technology Center/Art Unit: 2837

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed June 18, 2003, please enter the following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Amendments to the Drawings begin on page 21 of this paper and include both attached replacement sheets and annotated sheets showing changes.

Remarks/Arguments begin on page 22 of this paper.

12/15/2003 601RETA1 00000113 201430 10028999

01 FC:1202 126.00 DA
02 FC:1201 602.00 DA

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